with Initial

PTO/SB/01 (10-01) Approved for use through 10/31/2002. OMB 0651-0032

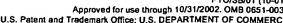
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Attorney Docket Number **DECLARATION FOR UTILITY OR** MARC FRANS IHEENWES First Named Inventor **DESIGN** PATENT APPLICATION **COMPLETE IF KNOWN** (37 CFR 1.63) **Application Number** Filing Date Declaration Declaration Submitted Submitted after Initial Art Unit Filing (surcharge (37 CFR 1.16 (e))

| Filing | required) | Examiner Name | | | | | |
|--|----------------|-------------------------------------|-------------------------|---------------------------------|--|--|--|
| As the below named inventor, I hereby declare that: | | | | | | | |
| My residence, mailing address, and citizenship are as stated below next to my name. | | | | | | | |
| I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled: | | | | | | | |
| WIRELESS ACCESS SYSTEM | | | | | | | |
| (Title of the Invention) | | | | | | | |
| the specification of which | | | | | | | |
| is attached hereto | | | | | | | |
| OR | | | | | | | |
| was filed on (MM/DD/YYYY) as United States Application Number or PCT International | | | | | | | |
| | | | | | | | |
| Application Number | and was amende | d on (MM/DD/YYYY) | | (if applicable). | | | |
| I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. | | | | | | | |
| I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. | | | | | | | |
| I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed. | | | | | | | |
| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? YES NO | | | |
| | | , | | | | | |
| Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: | | | | | | | |

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DECLARATION — Utility or Design Patent Application

| Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below | | | | | | |
|---|---------------|---------------|---------------------|--|--|--|
| Name MARC FRANS THEE UNES | | | | | | |
| Address 660 LIVE OA L AVE | | | | | | |
| CHY MENLO PARK. | Statu | · C4 | ZIP 94025 | | | |
| Country USA Tele | ephone 650.32 | 9.1041 | Fax | | | |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | | | | |
| NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor | | | | | | |
| Given Name (first and middle [if any]) MARC FLANS Family Name THEE UW ES | | | | | | |
| Invertor's Signature MARC | Date | | | | | |
| Residence: City MENCO PARIZ | State CA | Country U.J.4 | Citizenship \$26144 | | | |
| Malling Address 660 LIVE 04k AVE | | | | | | |
| CHY MENLO PARK | State (A | ZIP 94025 | Country US:4 | | | |
| NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor | | | | | | |
| Given Name (first and middle [if any]) | | | | | | |
| Inventor's Signature Date | | | | | | |
| Residence: City | State | Country | Cittzenship | | | |
| Mailing Address | | | | | | |
| City | State | ZIP | Country | | | |
| Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto. | | | | | | |